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#4

JUN 20 2002

PTO/SB/01 (03-01)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

|                          |                   |
|--------------------------|-------------------|
| Attorney Docket Number   | 960296.97206      |
| First Named Inventor     | Hector F. DeLuca  |
| <b>COMPLETE IF KNOWN</b> |                   |
| Application Number       | 10/074,102        |
| Filing Date              | February 12, 2002 |
| Group Art Unit           |                   |
| Examiner Name            |                   |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PREPARATIONS AND USE OF AN Ah RECEPTOR LIGAND,  
2-(1'H-INDOLE-3-CARBONYL)-THIAZOLE-4-CARBOXYLIC ACID METHYL ESTER**

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) February 12, 2002 as United States Application Number or PCT International

Application Number 10/074,102 and was amended on (MM/DD/YYYY) n/a (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority                 |                          | Certified Copy Attached? |                          |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|                                     |         |                                  | Not Claimed              | YES                      | NO                       | YES                      |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

**Burden Hour Statement** This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U S Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number  
or Bar Code Label **27114**  Correspondence address below

Name **OTYPE** **JUN 20 2002** **16109**

Address **U.S. PATENT & TRADEMARK OFFICE**

Address

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Country \_\_\_\_\_ Telephone \_\_\_\_\_ Fax \_\_\_\_\_

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

|   |           |                                  |
|---|-----------|----------------------------------|
| Given Name<br>(first and middle [if any]) | Hector F. | Family Name DeLuca<br>or Surname |
|---|-----------|----------------------------------|

|                         |                         |      |
|-------------------------|-------------------------|------|
| Inventor's<br>Signature | <i>Hector F. DeLuca</i> | Date |
|-------------------------|-------------------------|------|

|                 |           |       |    |         |     |             |     |
|-----------------|-----------|-------|----|---------|-----|-------------|-----|
| Residence: City | Deerfield | State | WI | Country | USA | Citizenship | USA |
|-----------------|-----------|-------|----|---------|-----|-------------|-----|

|                 |                 |  |  |  |  |  |  |
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| Mailing Address | 1809 Highway BB |  |  |  |  |  |  |
|-----------------|-----------------|--|--|--|--|--|--|

|                 |           |       |    |     |       |         |     |
|-----------------|-----------|-------|----|-----|-------|---------|-----|
| Mailing Address |           |       |    |     |       |         |     |
| City            | Deerfield | State | WI | ZIP | 53531 | Country | USA |

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

|   |          |                                |
|---|----------|--------------------------------|
| Given Name<br>(first and middle [if any]) | Jiasheng | Family Name Song<br>or Surname |
|---|----------|--------------------------------|

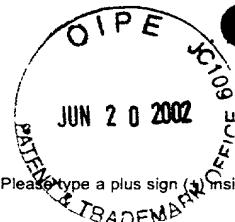
|                         |                    |      |
|-------------------------|--------------------|------|
| Inventor's<br>Signature | <i>S. Jiasheng</i> | Date |
|-------------------------|--------------------|------|

|                 |         |       |    |         |     |             |
|-----------------|---------|-------|----|---------|-----|-------------|
| Residence: City | Madison | State | WI | Country | USA | Citizenship |
|-----------------|---------|-------|----|---------|-----|-------------|

|                 |                             |  |  |  |  |  |  |
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| Mailing Address | 5319 Brody Drive, Apt. #103 |  |  |  |  |  |  |
|-----------------|-----------------------------|--|--|--|--|--|--|

|                 |         |       |    |     |       |         |     |
|-----------------|---------|-------|----|-----|-------|---------|-----|
| Mailing Address |         |       |    |     |       |         |     |
| City            | Madison | State | WI | ZIP | 53705 | Country | USA |

Additional inventors are being named on the **2** supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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**DECLARATION**

**ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 3 of 4**

|  |           |   |           |
|--|-----------|---|-----------|
| <b>Name of Additional Joint Inventor, if any:</b>  |           | <input type="checkbox"/> A petition has been filed for this unsigned inventor |           |
| Given Name (first and middle [if any])             |           | Family Name or Surname  |           |
| Margaret <i>Margaret Clagette-Dame</i>             |           | Clagette-Dame   |           |
| Inventor's Signature <i>Margaret Clagette-Dame</i> |           | Date <i>5/14/02</i>   |           |
| Residence: City                                    | Deerfield | State   | WI        |
| Country  | USA       | Citizenship   |           |
| Mailing Address                                    |           | 1809 Highway BB   |           |
| <b>Mailing Address</b>                             |           |   |           |
| City Deerfield                                     |           | State WI  | ZIP 53531 |
| Country USA  |           | Citizenship USA   |           |
| <b>Name of Additional Joint Inventor, if any:</b>  |           | <input type="checkbox"/> A petition has been filed for this unsigned inventor |           |
| Given Name (first and middle [if any])             |           | Family Name or Surname  |           |
| Richard E. <i>Richard E. Peterson</i>              |           | Peterson  |           |
| Inventor's Signature <i>Richard E. Peterson</i>    |           | Date <i>5/16/02</i>   |           |
| Residence: City                                    | Oregon    | State   | WI        |
| Country  | USA       | Citizenship   |           |
| Mailing Address                                    |           | 6144 Knollwood Drive  |           |
| <b>Mailing Address</b>                             |           |   |           |
| City Oregon  |           | State WI  | ZIP 53575 |
| Country USA  |           | Citizenship USA   |           |
| <b>Name of Additional Joint Inventor, if any:</b>  |           | <input type="checkbox"/> A petition has been filed for this unsigned inventor |           |
| Given Name (first and middle [if any])             |           | Family Name or Surname  |           |
| William M. <i>William M. Westler</i>               |           | Westler   |           |
| Inventor's Signature <i>William M. Westler</i>     |           | Date <i>5/16/02</i>   |           |
| Residence: City                                    | Madison   | State   | WI        |
| Country  | USA       | Citizenship   |           |
| Mailing Address                                    |           | 9 Rosewood Circle   |           |
| <b>Mailing Address</b>                             |           |   |           |
| City Madison                                       |           | State WI  | ZIP 53711 |
| Country USA  |           | Citizenship USA   |           |

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## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 4

|   |                  |   |                     |
|---|------------------|---|---------------------|
| <b>Name of Additional Joint Inventor, if any:</b> |                  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                     |
| Given Name (first and middle [if any])            |                  | Family Name or Surname  |                     |
| Rafal R.  |                  | Sicinski  |                     |
| <b>Inventor's Signature</b>                       | <i>RSicinski</i> |   | <b>Date</b> 6/05/02 |
| Residence: City                                   | Warsaw           | State   | Country Poland      |
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| <b>Name of Additional Joint Inventor, if any:</b> |                  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                     |
| Given Name (first and middle [if any])            |                  | Family Name or Surname  |                     |
|   |                  |   |                     |
| <b>Inventor's Signature</b>                       |                  |   | <b>Date</b>         |
| Residence: City                                   | State            | Country   | Citizenship         |
| <b>Mailing Address</b>                            |                  |   |                     |
| <b>Mailing Address</b>                            |                  |   |                     |
| City  | State            | ZIP   | Country             |
| <b>Name of Additional Joint Inventor, if any:</b> |                  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                     |
| Given Name (first and middle [if any])            |                  | Family Name or Surname  |                     |
|   |                  |   |                     |
| <b>Inventor's Signature</b>                       |                  |   | <b>Date</b>         |
| Residence: City                                   | State            | Country   | Citizenship         |
| <b>Mailing Address</b>                            |                  |   |                     |
| <b>Mailing Address</b>                            |                  |   |                     |
| City  | State            | ZIP   | Country             |

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